

STATE OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

224622

**BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA**

TRANSPORTATION COVER SHEET**DOCKET**

NUMBER: 2010 - 230 - T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: SHOW SHUTTLE INC.Telephone: 843-681-8404Address: RUSSELL CRANDALL

Fax: _____

18 YELLOW RAIL LANE

Other: _____

HILTON HEAD, S.C. 29926Email: ISLANDERS1266@aol.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)☐ Application - Class A/A Restricted☐ Application - Class C Taxi☒ Application - Class C Charter☐ Application - Class C Charter Bus☐ Application - Class C Non-Emergency☐ Application - Class C Stretcher Van☐ Application - Class E Household Goods☐ Application - Class E Hazardous Waste☐ Application☐ Request for Extension to Comply with Order☐ Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded☐ Request for Cancellation of Certificate☐ Request for Suspension☐ Request for Reinstatement☐ Request for Name Change on Certificate☐ Request to Amend Scope of Authority☐ Request to Amend Tariff (rate increase, etc.)☐ Request to Amend Passenger Limit☐ Request☐ Exhibit☐ Late-Filed Exhibit☐ Letter☐ Proposed Order☐ Publisher's Affidavit☐ Reservation Letter☐ Response☐ Return to Petition☐ Other: _____

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

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PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
101 Executive Center Drive, Suite 100
Columbia, South Carolina 29210
(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100 Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR
OPERATION OF MOTOR VEHICLE CARRIER

Date: 6/24/2010

CLASS C - CHARTER

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

SHOW SHUTTLE INC.

18 YELLOW RAIL LANE, HILTON HEAD, S.C. 29926

Street Address of Applicant

Mailing Address of Applicant if different from street address

843-681-8404

Phone

Fax

ISLANDERS1266@AOL.COM

Email Address

2. If incorporated, a copy of Articles of Incorporation must be attached. (If incorporated outside of SC, attach SC Secretary of State "Foreign Corporation" Certificate.)

3. Select Entity Type: (Check one)

☒ Individual Owner/Sole Proprietorship

☐ Partnership - List names and address of all person having an interest in the business.

Corporation - List names and addresses of two principal officers.

RUSSELL C. CRANDALL

18 YELLOW RAIL LANE

HILTON HEAD, S.C. 29926

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

BALANCE SHEET

Balance at Time Application is Filed:

Month JUNE Year 2010

Assets:

Cash	15,000.00 USD
Receivables	
Real Estate	
Buildings and Equipment (Net)	
Motor Vehicles (Net)	31,500.00 USD
Garage Equipment (Net)	
Machinery and Tools (Net)	
Supplies on Hand	
Prepays and Other Assets	
Total Assets	46,500.00 USD
<u>Liabilities and Equity:</u>	
Accounts Payable	
Notes Payable	
Mortgages Payable <i>STORAGE</i>	720.00 ANNUAL
Equipment Obligations	
Accrued Salaries and Wages	
Other Accrued Obligations	
Other Liabilities <i>INSURANCE</i>	5121.00 ANNUAL
Total Liabilities	5841.00 ANNUAL
Capital Stock	
Retained Earnings	
Total Equity	
Total Liabilities and Equity	5841.00 ANNUAL

PROPOSED RATES AND CHARGES FOR SERVICE

Maximum Proposed Rates and Charges for Service are as follows:

~~100.00~~ USD PER PERSON
1000.00 (P)

RATES WILL VARY WITH VENUE DESTINATION

PRICES MAY OR MAY NOT INCLUDE EVENT TICKETS
AND/OR ACCOMMODATIONS.

Counties to be Served:

~~BEAUFORT COUNTY~~
STATE WIDE (P)

Maximum Number of Passengers per Vehicle:

14 PASSENGERS + DRIVER

DESCRIPTION OF EQUIPMENT

[illegible]

INSURANCE QUOTE

This form **MUST BE COMPLETED AND SIGNED** by an **AUTHORIZED INSURANCE COMPANY REPRESENTATIVE**.

The following insurance quote is for:

Show Shuttle Inc.

Name of Motor Carrier

18 Yellow Rail Lane Hilton Head Island, SC

Address of Motor Carrier

29926

Amount of Premium:**Limits Quoted: (See Below)**

Liability Insurance \$ 4,473

Limits \$1,500,000 CSL

The above quoted premium is for a term of 12 months.

Minimum Limits - Intrastate Only:

1-7 Passengers \$ 25,000/50,000/25,000

8-15 Passengers \$ 25,000/100,000/25,000

Northland Insurance Company

Name of Insurance Company

385 Washington St. St. Paul, MN 55102

Home Office Address of Company

I am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

6/24/10

Date

D. P. Wood

Authorized Insurance Company Representative's Signature

The insurance quote must be complete, listing current insurance premiums. At the discretion of the Commission, a copy of current insurance policies may be required. Do not provide a copy of insurance policies unless requested.

Exhibit FWARUSSELL C. GRANDALL

Name of Applicant

1. Are there currently any outstanding judgments against the Applicant?

☐ Yes☒ No

If Yes, indicate nature of judgement(s) against applicant.

2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?

☒ Yes☐ No

3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

☒ Yes☐ No

Exhibit on Driver Qualifications

1. Applicant understands that all drivers must be a minimum of 18 years of age.

☒ Yes

☐ No

2. Applicant understands that a certified copy of the driver's three (3) year driving record issued by the SC DMV and such record from the DMV of the state in which the driver is or has been domiciled for such period must be maintained in the Applicant's business office.

☒ Yes

☐ No

3. Applicant understands that a criminal history background check from the state where the driver currently lives must be maintained in the Applicant's business office.

☒ Yes

☐ No

4. Applicant understands that all drivers operating a vehicle under a Class C Charter Certificate must have in their possession when operating a charter vehicle, a valid driver's license issued by the SC DMV or the current state of residence of the driver.

☒ Yes

☐ No

5. Applicant understands that all Class C Charter Certificate holders are prohibited from employing or leasing vehicles to drivers who are registered, or required to be registered, as sex offenders with the South Carolina State Law Enforcement Division or any national registry of sex offenders.

☒ Yes

☐ No

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA
POST OFFICE DRAWER 11649
COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Vol.26, S.C. Code Ann., 1976), and R.38-400 through 38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Vol.23A, S.C. Code Ann.,1976) and amendments thereto, and hereby promises compliance therewith.

STATE OF SOUTH CAROLINA)

COUNTY OF BEAUFORT)

SHOW SHUTTLE INC.

Applicant's Signature

I, RUSSELL C. CRANDALL, PRESIDENT
Name of Applicant's Representative Title

of SHOW SHUTTLE INC.,
Applicant

the Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

Russell C. Crandall
Signature of Applicant's Representative

SWORN TO BEFORE ME

This 22 day of June, 2010

Stefanie Todd Lee
Notary Public

Commission Expires 3/29/16



CERTIFIED TO BE A TRUE AND CORRECT COPY
TAKEN FROM AND COMPARED WITH THE
ORIGINAL ON FILE IN THIS OFFICE

**STATE OF SOUTH CAROLINA
SECRETARY OF STATE**

JUN 18 2010

ARTICLES OF INCORPORATION FOR A

STATUTORY CLOSE CORPORATION Mark Diamond
SECRETARY OF STATE OF SOUTH CAROLINA

Mark H. Simmons
SECRETARY OF STATE OF SOUTH CAROLINA

TYPE OR PRINT CLEARLY IN BLACK INK

1. The name of the proposed corporation is SHOW SHUTTLE, INC.
2. This corporation is a statutory close corporation, pursuant to Chapter 18, Title 33 of the 1976 South Carolina Code of Laws, as amended.
3. The initial registered office of the corporation is 18 Yellow Rail Lane
Street Address
Hilton Head Island Beaufort SC 29926
City County State Zip Code

and the initial registered agent at such address is Russell C. Crandall
Print Name

I hereby consent to the appointment as registered agent of the corporation. Ronald C. Lee
Agent's Signature

4. The corporation is authorized to issue shares of stock as follows. Complete "a" or "b", whichever is applicable:
- a. ☒ The corporation is authorized to issue a single class of shares, the total number of shares authorized is 1000
- b. ☐ The corporation is authorized to issue more that one class of shares:

Class of Shares	Authorized No. of Each Class

If shares are divided into two or more classes or if any class of shares is divided into series within a class, the relative rights, preferences, and limitations of the shares of each class, and of each series within a class, are as follows:

5. The existence of the corporation shall begin as of the filing date with the Secretary of State unless a delayed date is indicated (See Section 33-1-230(b) of the 1976 South Carolina Code of Laws, as amended) _____
6. Unless specified otherwise below, the transfer of shares of stock of the corporation shall be subject to the restrictions set out in Sections 33-18-110 through 33-18-130 of the 1976 South Carolina Code of Laws, as amended. Specify any variations in the statutory format in Sections 33-18-110 through 33-18-130.

100618-0115 FILED: 06/18/2010
SHOW SHUTTLE INC.

Filing Fee: \$135.00 ORIG

Mark Hammond

South Carolina Secretary of State

SHOW SHUTTLE, INC.Name of Corporation

7. Unless otherwise specified below the corporation shall have a board of directors (See Sections 33-18-210 of the 1976 South Carolina Code of Laws, as amended).

☒ This corporation elects not to have a board of directors.

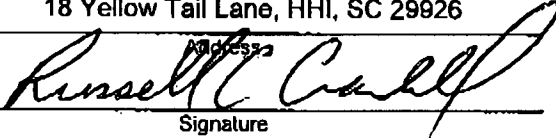
8. Check, if applicable.

☐ This corporation elects to have the provisions of Sections 33-18-140 through 33-18-170 of the 1976 South Carolina Code of Laws, as amended, which give the estate of a deceased shareholder the right to compel the corporation to purchase the deceased shareholder's shares, apply.

Specify any variations in the statutory format in Sections 33-18-140 through 33-18-170.

9. The optional provisions, which the corporation elects to include in the articles of incorporation, are as follows (See the applicable provisions of Sections 33-2-102, 33-18-330, 35-2-105, and 35-2-221 of the 1976 South Carolina Code of Laws, as amended).

10. The name, address and signature of each incorporator is as follows (only one is required):

a. Russell C. Crandall
Name
18 Yellow Tail Lane, HHI, SC 29926
Address

Signature

b. _____
Name

Address

Signature

c. _____
Name

Address

Signature

11. I, Frank H. Clabaugh, an attorney licensed to practice in the State of South Carolina, certify that the corporation, to whose articles of incorporation this certificate is attached, has complied with the requirements of Chapter 2, Title 33 of the 1976 South Carolina Code of Laws, as amended, relating to the articles of incorporation.

Date

6/9/2010

SHOW SHUTTLE, INC.

Name of Corporation

Signature

Frank H. Clabaugh

Type or Print Name

P.O. Box 6131

Address

Hilton Head Island, SC 29938

(843) 785-8866

Telephone Number

FILING INSTRUCTIONS

1. Two copies of this form, the original and either a duplicate original or a conformed copy, must be filed.
2. If the space in this form is insufficient, please attach additional sheets containing a reference to the appropriate paragraph in this form.
3. Enclose the fee of \$135.00 payable to the Secretary of State.
4. THIS FORM MUST BE ACCOMPANIED BY THE ANNUAL REPORT (SEE SECTION 12-19-20 OF THE 1976 SOUTH CAROLINA CODE OF LAWS, AS AMENDED)

Return to: Secretary of State
P.O. Box 11350
Columbia, SC 29211

SPECIAL NOTE

ALL SHARE CERTIFICATES ISSUED BY A STATUTORY CLOSE CORPORATION MUST CONTAIN THE FOLLOWING CONSPICUOUS NOTICE:

THE RIGHTS OF SHAREHOLDERS IN A STATUTORY CLOSE CORPORATION MAY DIFFER MATERIALLY FROM THE RIGHTS OF SHAREHOLDERS IN OTHER CORPORATIONS. COPIES OF THE ARTICLES OF INCORPORATION AND BY-LAWS, SHAREHOLDERS' AGREEMENTS AND OTHER DOCUMENTS, ANY OF WHICH MAY RESTRICT TRANSFERS AND AFFECT VOTING AND OTHER RIGHTS, MAY BE OBTAINED BY A SHAREHOLDER ON WRITTEN REQUEST TO THE CORPORATION.

THE FILING OF THIS DOCUMENT DOES NOT, IN AND OF ITSELF, PROVIDE AN EXCLUSIVE RIGHT TO USE THIS CORPORATE NAME ON OR IN CONNECTION WITH ANY PRODUCT OR SERVICE. USE OF A NAME AS A TRADEMARK OR SERVICE MARK WILL REQUIRE FURTHER CLEARANCE AND REGISTRATION AND BE AFFECTED BY PRIOR USE OF THE MARK. FOR MORE INFORMATION, CONTACT THE TRADEMARKS DIVISION OF THE SECRETARY OF STATE'S OFFICE AT (803) 734-1728.

SHOW SHUTTLE INC.
18 YELLOW RAIL LANE
HILTON HEAD ISLAND , SC. 29926
ISLANDERS1266@AOL.COM
843-681-8404
843-338-5583 CELL

PLEASE CONTACT ME IF THERE ARE ANY ARTICLES MISSING,
OR ANYTHING I CAN PROVIDE TO AID IN THE PROCESS. THIS IS
A NEW START UP BUSINESS FOR EVENT TRANSPORTATION OF
PASSENGERS TO VARIOUS VENUES.

THANK YOU